## **Application Data Sheet**

## **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Title:: INTERMODULATION SUPPRESSION FOR

TRANSMIT ACTIVE PHASED ARRAY

MULTIBEAM ANTENNAS WITH SHAPED

**BEAMS** 

Attorney Docket Number:: 040092-024310US

Request for Early Publication:: No

Request for Non-Publication:: Yes

Total Drawing Sheets:: 17

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Alan

Family Name:: Cherrette

City of Residence:: Hermosa Beach

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 415 Herondo Street, #156

City of Mailing Address:: Hermosa Beach

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 90254

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Erik

Family Name:: Lier

City of Residence:: Newtown

State or Province of Residence:: PA

Country of Residence:: US

Street of Mailing Address:: 130 Twining Bridge Road

City of Mailing Address:: Newtown

State or Province of mailing address:: PA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 18940

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Bryan

Family Name:: Cleaveland

City of Residence:: Baldwinsville

State or Province of Residence:: NY

Country of Residence:: US

Street of Mailing Address:: 1927 West Genesee Road

City of Mailing Address:: Baldwinsville

State or Province of mailing address:: NY

Country of mailing address:: US

Postal or Zip Code of mailing address:: 13027

## **Correspondence Information**

Correspondence Customer Number:: 20350

**Representative Information** 

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application claims the benefit 60/498,333 08/26/03

under 35 USC 119(e)

of

**Assignee Information** 

Assignee Name:: Lockheed Martin Corporation

Street of mailing address:: 6801 Rockledge Drive

City of mailing address:: Bethesda

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20817